FEC FORM 2

STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)								
	Miller, Max, , ,								
	(b) Address (number and street) 12 Chippenham Ct	☐ Check if address changed				2. Candidate's FEC Identification Number H2OH16051			
	(c) City, State, and ZIP Code					3. Is This	lew		Amended
	Rocky River	OH 44116				Statement (N) OR	×	(A)
4.	Party Affiliation	5. Office Soug	jht			rict of Candidate			
	REPUBLICAN PARTY	House			OH	07			
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE									
7.	I hereby designate the following named political committee as my Principal Campaign Committee for the 2024 (year of election)								
	NOTE: This designation should be filed with the appropriate office listed in the instructions.								
(a) Name of Committee (in full) MAX MILLER FOR CONGRESS									
(b) Address (number and street) 19525 HILLIARD BLVD #16010									
	(c) City, State, and ZIP Code								
	ROCKY RIVER				ОН	44116			
DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives) 8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.									
NOTE: This designation should be filed with the principal campaign committee.									
(a) Name of Committee (in full) MAX MILLER VICTORY									
(b) Address (number and street) 824 S MILLEDGE AVE STE 101									
	(c) City, State, and ZIP Code								
	ATHENS				GA	30605			
I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.									
Si	gnature of Candidate					Date			
M	iller, Max, , ,			[Elec	tronically Filed]	11/18/2022			
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.									

FEC FORM 2 (REV. 02/2009)